

# CLAIMS ONLY

SERIAL NO.	FILING DATE
09843519	
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1						
2						
3						
4						
5						
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7	/					
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11	/					
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49						
50						
TOTAL IND.	3		↓		↓	
TOTAL DEP.	11		↔		↔	
TOTAL CLAIMS	14					

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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98						
99						
100						
TOTAL IND.			↓		↓	
TOTAL DEP.			↔		↔	
TOTAL CLAIMS						

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS